

February 2009

Golf After Total Knee Replacement



Total knee replacement can be tough on a golfer. A 2008 report from the American Academy of Orthopaedic Surgeons found that swinging a golf club creates even more stress on the knee than jogging. But with a good rehabilitation program like the month-by-month regimen outlined below, you can be back on the course by the summer.

January to March: Postsurgery, the emphasis will be on general strengthening, making your

operative side as functional as your nonoperative side.

April: Begin chipping and putting. Your knee must handle a variety of rotational forces when playing golf; incorporating cable machines and balance boards into therapy can help strengthen the knee accordingly.

May: Start hitting short irons. Begin with a small bucket and see how you feel. If you experience any pain or stiffness, take a break. Trade the golf cleats (which actually increase the rotational stress on the knee) for a tennis-type sole shoe.

June: By now, you will be on your way to playing all the golf clubs.

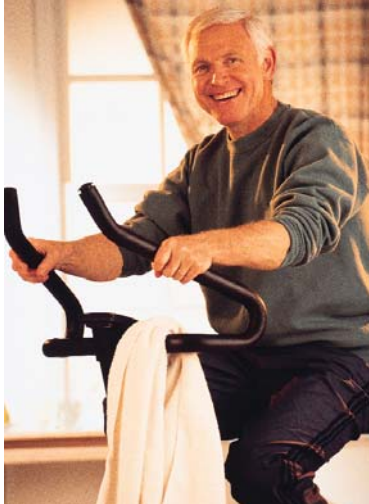
However, take the following precautions:

- **At first, use a golf cart.** Walking a full 18 holes can wear *YOU* out before you can enjoy swinging a club. Use the cart for the first few rounds. Then walk 9 holes and use the cart on the back 9. Progress slowly!
- **Don't carry your clubs.** When you do start walking the course again, use a caddy or roller to avoid putting added stress on the knee.
- **Take a rain check.** Avoid playing in wet weather. You are still getting your balance back, and the last thing you need is to slip on a wet course.
- **Adjust your swing.** If you are right handed and the left knee was operated on, try turning the left foot more open toward your target to minimize rotation at the knee (reverse this for lefties with a right knee replacement). This may lead to a push/slice; talk to a golf teaching professional for help.

Above all, be patient. If you follow our instructions and commit to rehabilitation, you will be back working on that handicap in no time.

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Can I Exercise After a Mild Heart Attack?



For most people who have had heart attacks, the answer to this question is “yes”—but before you begin to exercise, you should consult your physician about which limitations you should observe, ranging from how moderate or intense your workouts should be to particular motions you should avoid. In fact, physicians often refer heart attack patients to specialized exercise facilities called **cardiac rehabilitation clinics**, which have equipment and physical therapists to best meet their needs.

It is common to worry that exercise could further damage your heart, but generally, the reverse is true: Not exercising puts you at greater risk for a second cardiac event. For most people, exercising after a heart attack is beneficial, both physically and emotionally. Proper exercise can

- **help you strengthen—not strain—your cardiac muscles;**
- **help you lose weight and reduce your blood pressure and cholesterol level;**
- **make you feel you have better control over your own wellness;** and
- **make you less likely to experience depression.**

Once you have gotten the green light to exercise on your own, we can design a program to strengthen your heart. A typical exercise plan might involve 10 minutes of warm-ups and stretches, 20 to 30 minutes 3 or 4 times a week of more intense, whole-body movement (such as swimming, walking or stationary bicycling), and 5 minutes of cooling down. These exercises should be performed at least 3 times a week.

After a while, we would likely suggest adding resistance training to your regimen. Using weights, resistance bands or exercise machines helps you maintain the muscle tone you have and even increase it. We will minimize the isometric actions of these exercises, because these can influence blood pressure. Exercise also strengthens muscles and bones, so the risk of low-back pain, osteoporosis and the likelihood of falls can decrease. Blood pressure and body-fat percentage will be affected, as well—benefits that affect everyone, not just people who have suffered heart attacks.

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Resuming Activity After Disc Surgery



Resuming activity after going through an operation can be as scary as getting back on the proverbial horse, especially in an area as sensitive as the back. But an extensive October 2008 study from the Cochrane Review (an international, nonprofit health care research organization) suggests that getting active as soon as possible is the best thing you can do to recover successfully from disc surgery.

The study examined 14 different trials focusing on exercise after lumbar disc surgery. In all cases, the overall consensus was that **the sooner patients started exercising, the less pain and disability they experienced.** In fact, when a relatively intensive exercise program was started 4 to 6 weeks after surgery, patients experienced a quicker return to normal daily activities and work, with no increase in complications or the need for additional surgeries.

Of course, every case is unique, and you will need to follow your surgeon's instructions. But most physicians encourage patients to get moving as soon as possible. Why is this so important? Well, the better your muscle function in general, the easier your recovery will be. Back pain is often due to muscle weakness (especially in muscles that support spine and joint function) or poor physical condition. Just because you treated a specific problem with surgery does not mean that the conditions that caused the problem in the first place have been resolved. **Building strength, cardiovascular stamina and flexibility can enhance the overall result of your surgery.**

If you are experiencing postsurgical pain, we can show you ways to work around—and more importantly, alleviate—this discomfort. We can start slowly, working with your physician to design a program that focuses on strength training, resistance exercises and rebuilding cardiovascular endurance. Committing to an exercise program can help you get back on your feet and feel better than ever, which makes your disc surgery all the more worthwhile.

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Sneaking Exercise Into Your Schedule



Are you frazzled? Stressed? Do not think there are enough hours in the day to get everything done? Then when you hear that the Department of Health and Human Services has established physical activity guidelines that call for getting a minimum of 2½ hours of moderate exercise every week, your first thought may be, “No way. I don’t have the time.” But think again: If you are constantly on the go, have an irregular schedule and have not been exercising, you are the perfect candidate to become an “exercise sneak.”

The “golden rule” of sneaking exercise is that **some exercise is always better than none**. So, perhaps you cannot devote 1½ hours to go to the gym, but you can take a 15-minute walk at lunch, take the stairs instead of the elevator to your next sales meeting or play catch with your kids before dinner. Every little bit helps, especially if you can exercise for 10 minutes or longer doing something that gets your heart beating faster and makes you slightly out of breath.

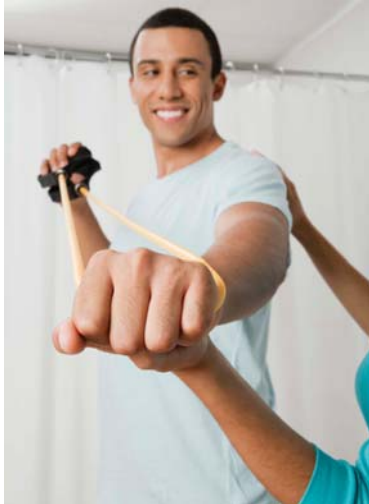
Here are some other ways to sneak exercise into your overloaded days:

- **Walk with the kids to school.**
- **Meet a friend for a walk rather than for coffee.**
- **Clean one room every day at a fast pace; play upbeat music to get you moving while you clean.**
- **Do stretches while watching television.**
- **Wear a pedometer. Challenge yourself to walk a few steps more every day.**
- **Walk the dog. He/she will love you for it.**

We can show you how to get the most out of short bursts of exercise. Let us show you strength training exercises you can do using free weights or rubber bands while you watch your favorite television show. You will find that exercise sneaking reduces stress and can leave you feeling less frazzled and less tired at the end of the day.

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Rotator Cuff Surgery Recovery Time



Your surgeon said it might take almost one year to be able to function normally after your rotator cuff surgery, but your friend had the same surgery and was doing well within 4 months. What explains the discrepancy in the length of recovery time?

One important factor affecting the recovery period is the size of the tear and the severity of such symptoms as pain and difficulty performing daily activities such as getting dressed or lifting household objects. The technique employed by the surgeon to fix the tear will have a dramatic impact on your recovery, as well. **Some surgeries involve large incisions and longer recovery time; others use newer, less-invasive techniques, resulting in shorter recovery time.**

Your general health plays an equally important part in the length of your recovery, too. For example, your friend, an active, healthy athlete with good muscle tone (and high-quality tissues), had a minimally invasive repair for a small tear caused by a one-time sports injury. In contrast, say, your rotator cuff problem was degenerative in nature, the result of years of overuse and strain. Perhaps the pain involved in your injury kept you out of the gym, and your tissue quality has become rather poor. Add to the equation the fact that your large, complex tear was fixable only through an open repair, which is far more extensive surgery. For these reasons, you are looking at a much longer recovery time.

Scar tissue, smoking, poor nutrition or other health issues can also impede your progress. Regardless, **recovery simply takes longer for certain people; it can often take up to a year for a complete recovery.**

Recovery tends to be easier the earlier a physical therapy program is begun. We can personalize a physical therapy program especially for you. We will also teach you how to avoid re-injuring the repaired rotator cuff. By working diligently with us, not putting any time limits or pressure on yourself and following this program, you will regain movement and reduce your pain.